

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | <i>MD</i> | 932 | 01-16-01 |
| RESPONSE FORMALITY REVIEW | <i>MD</i> | 10911 | 02-12-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 (Through numeral)..... Canceled A Appeal
 - Restricted O Objected

| Claim | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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BEST AVAILABLE COPY

Jc4 JC932

PTO

MD
11-5-01
5-17-01